03/10/2010 11:25

Image# 10990356439

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines The Council of Insurance Agents & Brokers Political Action Committee 701 Pennsylvania Avenue, NW ADDRESS (number and street) Suite 750 Check if different than previously Washington DC 20004 2608 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS NEW **AMENDED** C00039578 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Oct 20 (M10) Jul 20 (M7) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2009 04 30 2009 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ken A. Crerar Type or Print Name of Treasurer Electronically Filed by Ken A. Crerar 03 10 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

A. Form/Schedule: F3XA Amending report to reflect reporting change in April 20th filing; regarding YTD balance on line 11c.

Transaction ID:

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS 3 / 25

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

The Council of Insurance Agents & Brokers Political Action Committee

D D [®]D 0 4 0 1 2009 0 4 3 0 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 201736.30 January 1 (b) Cash on Hand at 244127.99 Begining of Reporting Period 39915.10 194010.40 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 284043.09 395746.70 6(a) and 6(c) for Column B) 10954.46 122658.07 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 273088.63 273088.63 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D)

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 25

Write or Type Committee Name

The Council of Insurance Agents & Brokers Political Action Committee

Report Covering the Period:

From:

01

2009

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^Y ^Y ^Y ^Y 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	38318.00	180944.00
	(ii) Unitemized	1597.10	10066.40
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	39915.10	191010.40
(i	•	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	3000.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	39915.10	194010.40
	ransfers From Affiliated/Other arty Committees	0.00	0.00
3. A	II Loans Received	0.00	0.00
	oan Repayments Received Offsets To Operating Expenditures	0.00	0.00
Ì	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
to	o Federal candidates and Other colitical Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	ransfers from Non-Federal and Levin Funds		
(6	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(i	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	39915.10	194010.40
	otal Federal Receipts ubtract Line 18(c) from Line 19)	39915.10	194010.40

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

5 / 25

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	1271.08	4693.24
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	1271.08	4693.24
2.	Transfers to Affiliated/Other Party	2.22	0.00
3.	Committees Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	9683.38	115764.18
4.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
7.	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	2200.65
	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	10954.46	122658.07
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	10954.46	122658.07

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 6 / 25

III. Net Contributions/0 Expenditures	Operating COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than from Line 11(d), page 3)		194010.40
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
 Net Contributions (other than I (subtract Line 34 from Line 33 	00015 10	194010.40
66. Total Federal Operating Experience (add Line 21(a)(i) and Line 21	1271 08	4693.24
77. Offsets to Operating Expendit (from Line 15, page 3)	0.00	0.00
 Net Operating Expenditures (subtract Line 37 from Line 36 	1271.08	4693.24

FE6AN026

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, oth NAME OF COMMITTEE (In	er than using the name and a	ddress of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middl Mr. Gerard J. McGlone, Jr. Mailing Address 107 Cre City Malvern FEC ID number of contributi federal political committee. Name of Employer TRION (HQ) Receipt For:	stside Way State PA Occupatii	Zip Code 19355-2426 on ce Broker te Year-to-Date ▼	Date of Receipt 0 4 0 1 2 0 0 9 Transaction ID: 29632343 Amount of Each Receipt this Period 1000.00
Primary General Primary General Primary General General Primary General Gener	e Initial)	1000.00	Date of Receipt
Mailing Address 1750 No City Malvern FEC ID number of contributi federal political committee. Name of Employer TRION (HQ)	State PA Occupati	Zip Code 19355-8738	Transaction ID: 29632610 Amount of Each Receipt this Period 1000.00
Receipt For: Primary Other (specify)	Aggregat	ce broker te Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middl Mr. Robert J. Lucci Mailing Address 701 Larl City Warrington FEC ID number of contributi federal political committee.	kspur Lane State PA	Zip Code 18976-1681	Date of Receipt M M M / D D / Y Y Y Y Y O 4 0 1 2 0 0 9 Transaction ID: 29632884 Amount of Each Receipt this Period 1000.00
Name of Employer TRION (HQ) Receipt For: Primary General Other (specify) ▼	Aggregat	on ce Broker te Year-to-Date ▼	
SUBTOTAL of Receipts This	Page (optional)	······	3000.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 25 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Council of Insurance Agents & B	Statements may not be sold or used by any perse e name and address of any political committee to rokers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Robert Popolizio Mailing Address 65 Longacre Drive City Collegeville FEC ID number of contributing federal political committee. Name of Employer TRION (HQ) Receipt For: Primary General Other (specify)	State Zip Code PA 19426-2898 C Occupation Insurance Broker Aggregate Year-to-Date 1000.00	Date of Receipt M M M O 1 O 1 Transaction ID: 29633568 Amount of Each Receipt this Period 1000.00
Full Name (Last, First, Middle Initial) Mr. Patrick Kain Mailing Address 303 Cherry Lane City Havertown FEC ID number of contributing federal political committee. Name of Employer TRION Receipt For: Primary General Other (specify)	State Zip Code PA 19083-1616 C Occupation Insurance Broker Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Mark G. Cornish Mailing Address 1475 Hilltop Road City Chester Springs FEC ID number of contributing federal political committee. Name of Employer TRION (HQ)	State Zip Code PA 19425-2809 C Occupation	Date of Receipt M M M O 1 2009 Transaction ID: 29636906 Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	Insurance Broker Aggregate Year-to-Date ▼ 1000.00	3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persor g the name and address of any political committee to see Brokers Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	x Brokere Femiliaar Florieri Germinikee	
Mr. William T. Holmes		Date of Receipt
Mailing Address 8 Barr Road		04 01 2009
City	State Zip Code	Transaction ID: 29637132
Berwyn	PA 19312-1502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer TRION (HQ)	Occupation Insurance Broker	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Ronald M. Smyth Mailing Address 130 Country Lane		Date of Receipt
City	State Zip Code	0 4 0 1 2 0 0 9 Transaction ID: 29637420
Phoenixville	PA 19460-1703	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer TRION (HQ)	Occupation Insurance Broker	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Andrew P. Neary		Date of Receipt
Mailing Address 9 Stable Court		04 01 2009
City	State Zip Code	Transaction ID: 29637607
Collegeville	PA 19426-4410	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer TRION (HQ)	Occupation Insurance Broker	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SURTOTAL of Receipts This Page (option	al)	3000.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 25 (check only one) X
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Br			on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Steven Cherok Mailing Address 8911 Heydon Hall Circ City Charlotte FEC ID number of contributing federal political committee. Name of Employer TRION (HQ)	State NC C		Date of Receipt M M M O 1 2009 Transaction ID: 29637843 Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify) ▼	Insuranc Aggregate	e Broker e Year-to-Date ▼ 1000.00]
Full Name (Last, First, Middle Initial) Mr. Gregory B. Norton Mailing Address 109 Grace Church Str City	reet	Zip Code	Date of Receipt M
Rye FEC ID number of contributing federal political committee. Name of Employer	NY C Occupatio	10580-3946	Amount of Each Receipt this Period 1000.00
Receipt For: Primary General Other (specify) ♥	Insuranc Aggregate	e Broker e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Edmund F. Garno, Jr. Mailing Address 915 Stony Lane	<u> </u>		Date of Receipt 0 4 0 1 2 0 0 9
City Gladwyne	State PA	Zip Code 19035-1125	Transaction ID: 29639092 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	n	1000.00
Name of Employer TRION (HQ) Receipt For: Primary General Other (specify) ▼	Insuranc		
SUBTOTAL of Receipts This Page (optional) .			3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 25 (check only one) X
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	
The Council of Insurance Agents & E Full Name (Last, First, Middle Initial) Mr. Robert S. Shestack Mailing Address 1 Brookwood Road City Mount Laurel FEC ID number of contributing federal political committee. Name of Employer TRION (HQ) Receipt For: Primary General Other (specify)	State Zip Code NJ 08054-4713 C Occupation Insurance Broker Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. T.C. Colvin, Jr. Mailing Address 3273 Kruer Court City Edgewood FEC ID number of contributing federal political committee.	State Zip Code KY 41017-3396	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Schiff, Kreidler-Shell, Inc. (HQ) Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Chris Boone	Occupation Insurance Broker Aggregate Year-to-Date 500.00	Date of Receipt
Mailing Address 103 Parkdale Place City Madison FEC ID number of contributing federal political committee. Name of Employer Stewart-Sneed-Hewes/Banco-rpSouth Insur Receipt For:	State Zip Code MS 39110-8477 C Occupation Vice President/Marketing	Transaction ID: 29784024 Amount of Each Receipt this Period 1000.00
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 1000.00	2500.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and St	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16 17 Property for the purpose of soliciting contributions
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Bro	name and ad	dress of any political committee to	solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Mr. Edmund F. Garno, III Mailing Address 144 Rose Lane			Date of Receipt
	Maining Address 144 Hose Latte			04 10 2009
	City	State	Zip Code	Transaction ID: 29784025
	Haverford	PA	19041-1619	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer TRION (HQ)	Occupation Insurance		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) Mr. Gregory B. Milward			Date of Receipt
	Mailing Address 1640 Ashwood Road			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: 29784027
	Lexington	KY	40502-1908	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer Powell Walton Milward	Occupation Insurance	on se Broker	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Craig Hasday			Date of Receipt
	Mailing Address 3500 Hudson Street 4th Floor			0 4
	City	State	Zip Code	Transaction ID: 29784028
	New York	NY	10014	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer Frenkel & Co., Inc. (HQ)	Occupation Senior V	on lice President	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00	
	SUBTOTAL of Receipts This Page (optional)			6000.00
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 25 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) The Council of Insurance Agents & B	e name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Lawrence Kirshner Mailing Address 350 Hudson Street 4th Floor City New York FEC ID number of contributing federal political committee. Name of Employer Frenkel & Co., Inc. (HQ) Receipt For: Primary General Other (specify)	State Zip Code NY 10014-4504 C Occupation Insurance Broker Aggregate Year-to-Date 2500.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. John McDonald Mailing Address 12 Lenox Road City Summit FEC ID number of contributing federal political committee. Name of Employer Herbert L. Jamison & Co., LLC (HQ) Receipt For: Primary General Other (specify)	State Zip Code NJ 07901-3733 C Occupation Director Aggregate Year-to-Date 3000.00	Date of Receipt M M M D D D 2009 Transaction ID: 29784046 Amount of Each Receipt this Period 1500.00
Full Name (Last, First, Middle Initial) Mr. Daniel D. Hite Mailing Address 3104 Forrest Park Av City Nashville FEC ID number of contributing federal political committee. Name of Employer First Horizon Insurance (HQ) Receipt For: Primary General Other (specify)	enue State Zip Code TN 37215-1106 C Occupation Insurance Broker Aggregate Year-to-Date 1000.00	Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	1	5000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 25 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	 y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
The Council of Insurance Agents & Br	okers Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Ms. Kay Johnson			Date of Receipt
Mailing Address 501 Olde Court Road			04 15 2009
City	State	Zip Code	Transaction ID: 29784217
Saint Charles	MO	63303-4077	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Daniel & Henry Company (H-	Occupatio Insuranc		7
Q), The Receipt For:		e Year-to-Date	\dashv
Primary General Other (specify) ▼	Aggregate	250.00	
Full Name (Last, First, Middle Initial) Mr. W. Michael Mann	I		Date of Receipt
Mailing Address 2607 Jefferson Avenue	Э		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 29784441
New Orleans	LA	70115-7009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Eustis Insurance, Inc. (H- Q)	Occupatio Insuranc		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mr. Robert B. Jackson			Date of Receipt
Mailing Address 919 Drew Place			04 17 2009
City	State	Zip Code	Transaction ID: 29791830
Nashville	TN	37205-4513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Crichton Group (HQ), The	Occupatio Insuranc		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	1
SUBTOTAL of Receipts This Page (optional)			2250.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 25 (check only one) X
or for commercial purposes, other than us NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to & Brokers Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James C. Ward, III Mailing Address 1209 Nichol Lane City Nashville FEC ID number of contributing federal political committee. Name of Employer Crichton Group (HQ), The Receipt For: Primary General Other (specify)	State Zip Code TN 37205-4419 C Occupation Insurance broker Aggregate Year-to-Date 1500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Cooper L. Jones Mailing Address 209 Lauderdale F City Nashville FEC ID number of contributing federal political committee. Name of Employer Crichton Group (HQ), The	State Zip Code TN 37205-1821 C Occupation Insurance Broker	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Phil Barnes Mailing Address 1183 Cross Cree City Franklin FEC ID number of contributing federal political committee.	Aggregate Year-to-Date 500.00 k Drive State Zip Code TN 37067-4035	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Crichton Group (HQ), The Receipt For: Primary General Other (specify) ▼	Occupation Insurance Broker Aggregate Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (option	onal)	2500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 25 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) The Council of Insurance Agents 8	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Rob Crichton Mailing Address 5105 Boxcroft Driv City	/e State	Zip Code	Date of Receipt 0 4 1 7 2 0 0 9 Transaction ID: 29791834
Nashville FEC ID number of contributing federal political committee.	TN	37205-3701	Amount of Each Receipt this Period 500.00
Name of Employer Crichton Group (HQ), The Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		
Full Name (Last, First, Middle Initial) Ms. Cynthia J. Bowman Mailing Address 1360 E 9th Street Suite 600 City Cleveland	State OH	Zip Code 44114-1737	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Oswald Companies (HQ) Receipt For: Primary General Other (specify)	Occupation Insurance Aggregate		90.00
Full Name (Last, First, Middle Initial) Mr. Paul Catania Mailing Address 5758 Williamsburg	g Circle		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Hudson FEC ID number of contributing federal political committee.	State OH	Zip Code 44236-3780	Transaction ID: 29798536 Amount of Each Receipt this Period 60.00
Name of Employer Oswald Companies (HQ) Receipt For: Primary General Other (specify) ▼	Occupation Insurance Aggregate		
SUBTOTAL of Receipts This Page (option	al)		650.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 25 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) The Council of Insurance Agents & E	Statements may not be sold or used by any person he name and address of any political committee to a Brokers Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Edward X. McNamara Mailing Address 1360 E 9th Street Suite 600 City Cleveland FEC ID number of contributing federal political committee. Name of Employer Oswald Companies (HQ)	State Zip Code OH 44114-1737 C Occupation	Date of Receipt M M 20 Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) ▼	Insurance Broker Aggregate Year-to-Date ▼ 336.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey J. Schwab Mailing Address 1360 E 9th Street Suite 600 City CLEVELAND FEC ID number of contributing federal political committee.	State Zip Code OH 44114-1737	Date of Receipt M M C D D C Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Oswald Companies (HQ) Receipt For: Primary General Other (specify)	Occupation Insurance Broker Aggregate Year-to-Date 336.00	
Full Name (Last, First, Middle Initial) Mr. Alex Gloeckner Mailing Address 2606 Creighton Way		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City Salt Lake City FEC ID number of contributing federal political committee.	State Zip Code UT 84121-4059 C	Transaction ID: 29876539 Amount of Each Receipt this Period 500.00
Name of Employer Fred A. Moreton & Co. (HQ) Receipt For: Primary General Other (specify) ▼	Occupation Insurance Broker Aggregate Year-to-Date 500.00	
SUBTOTAL of Receipts This Page (optional)	>	668.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any the name and address of any political committ	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
The Council of Insurance Agents &	Brokers Political Action Committee	
Full Name (Last, First, Middle Initial) Mr. Charles R. Daniels, III		Date of Receipt
Mailing Address 23 Bridle Way	7'- 0 - 1	04 23 2009
City	State Zip Code NY 12564-2220	Transaction ID: 29877882
Pawling FEC ID number of contributing federal political committee.	NY 12564-2220	Amount of Each Receipt this Period 2500.00
Name of Employer Rose & Kiernan, Inc.	Occupation Insurance Broker	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Ziaja		Date of Receipt
Mailing Address 2844 Glenhurst Ave	nue South	04 23 7 2009
City	State Zip Code	Transaction ID: 29878241
Saint Louis Park	MN 55416-4102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer RJF Agencies, Inc. (HQ)	Occupation Insurance Broker	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Michael A. Paschke		Date of Receipt
Mailing Address 13812 South Canyo		04 23 7 2009
City	State Zip Code	Transaction ID: 29878250
Phoenix	AZ 85048-9083	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Brown & Brown, Inc.	Occupation Insurance Broker	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	3250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 25 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to Brokers Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James D. Kapnick Mailing Address 490 North Scott St	reet	Date of Receipt
City Adrian FEC ID number of contributing	State Zip Code MI 49221-1335	Transaction ID: 29882338 Amount of Each Receipt this Period
federal political committee. Name of Employer Kapnick Insurance Group	Occupation Insurance Broker	500.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Stephen J. Peck Mailing Address 859 Westchester F	Road	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 29882412
Grosse Pointe Park	MI 48230-1827	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Kapnick Insurance Group	Occupation Insurance Broker	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00]
Full Name (Last, First, Middle Initial) Mr. John McDonald	·	Date of Receipt
Mailing Address 12 Lenox Road		$\begin{bmatrix} & & & & & & & & & & & & & & & & & & &$
City	State Zip Code	Transaction ID: 29883572
Summit FEC ID number of contributing federal political committee.	NJ 07901-3733	Amount of Each Receipt this Period 1500.00
Name of Employer Herbert L. Jamison & Co., LLC (HQ) Receipt For:	Occupation Director	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00]
SUBTOTAL of Receipts This Page (option		2500.00

A.

FOR LINE NUMBER: PAGE 20 / 25 **SCHEDULE A (FEC Form 3X)** Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Brokers Political Action Committee Full Name (Last, First, Middle Initial) Date of Receipt Mr. Parkes Brandon Mailing Address 2012 McPherson Lane 0 4 17 2009 City State Zip Code Transaction ID: 29932017 **Nashville** TN 37221-4442 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Crichton Group (HQ), The Occupation Insurance Broker Receipt For: Aggregate Year-to-Date Primary General 1000.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	•	38318.00

City Washington DC 20001 Purpose of Disbursement In-Kind for a Bunning Reception at Johnny's Half Shell on 3/26/2009 Office Sought: House Johnny's Half Shell on 3/26/2009 Office Sought: House President President State: KY District: Full Name (Last, First, Middle Initial) Team Emerson Mailing Address 400 Broadway Ste. 326 City Cape Girardeau MO 63701 Purpose of Disbursement Candidate Name Jo Ann Emerson Office Sought: X House President Senate President Senate President MO District: 08 Full Name (Last, First, Middle Initial) Candidate Name Jo Ann Emerson Office Sought: X House President Senate President Senate President Senate President Senate President Senate President Senate President State: MO District: 08 Full Name (Last, First, Middle Initial) Klein For Congress Mailing Address 21301 Powerline Road, Suite 204 City State Zip Code Amount of Each Disbursement Office Sought: Amount of Each Disbursement Transaction ID: 2961873 Date of Disbursement Office Sought: Amount of Each Disbursement Office S	E 21 / 25
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such corn NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Brokers Political Action Committee Full Name (Last, First, Middle Initial) Johnny's Half Shell Mailing Address 400 North Capitol Street NW City Washington Purpose of Disbursement In-Kind for a Bunning Reception at Johnny's Half Shell on 3/26/2009 Uffice Sought: Versident State: KY District: Full Name (Last, First, Middle Initial) Team Emerson Mailing Address 400 Broadway Ste. 326 City Cape Girardeau Mo Ga701 Purpose of Disbursement Candidate Name Jo Ann Emerson Office Sought: Versident Senate President State: MO District: Disbursement Candidate Name Jo Ann Emerson Office Sought: X Primary General Category/ Type Amount of Each Disbursement Other (specify) Transaction ID: 2961873 Date of Disbursement Other (specify) Transaction ID	25 <u> </u>
NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Brokers Political Action Committee Full Name (Last, First, Middle Initial) Johnny's Half Shell Mailing Address 400 North Capitol Street NW City Washington Purpose of Disbursement In-Kind for a Bunning Reception at Johnny's Half Shell on 3/26/2009 Office Sought: Versident State: KY District: Full Name (Last, First, Middle Initial) Transaction ID: 2961873 Date of Disbursement In-Kind for a Bunning Reception at Johnny's Half Shell on 3/26/2009 Office Sought: Versident	
Johnny's Half Shell Mailing Address 400 North Capitol Street NW City State Zip Code Washington DC 20001 Purpose of Disbursement In-Kind for a Bunning Reception at Johnny's Half Shell on 3/26/2009 Candidate Name Jim Bunning Office Sought: House X Senate President Nother (specify) ▼ State: KY District: Full Name (Last, First, Middle Initial) Team Emerson Mailing Address 400 Broadway Ste. 326 City State Zip Code Cape Girardeau MO 63701 Purpose of Disbursement Candidate Name Jo Ann Emerson Office Sought: Y House Nother (specify) ▼ State: MO District: 08 Full Name (Last, First, Middle Initial) Caregory' Type Office Sought: Y House Nother (specify) ▼ Transaction ID: 2961873 Date of Disbursement Other (specify) ▼ Transaction ID: 2961873 Date of Disbursement Other (specify) ▼ Transaction ID: 2961873 Date of Disbursement Transaction ID: 2961873 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement Transaction ID: 2961873 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement Other (specify) ▼ Other (specify) ▼ Other (specify) ▼ Other (specify) ▼ Amount of Each Disbursement Other (specify) ▼ Other (spe	
Mailing Address 400 North Capitol Street NW City State Zip Code DC 20001 Purpose of Disbursement In-Kind for a Bunning Reception at Johnny's Half Shell on 3/26/2009 Office Sought: House Jeptesident President Pres	31
Purpose of Disbursement In-Kind for a Bunning Reception at Johnny's Half Shell on 3/26/2009 Office Sought:	ž 0 0 9 °
In-Kind for a Bunning Reception at Johnny's Half Shell on 3/26/2009 Candidate Name Jim Bunning Office Sought: House	
Office Sought:	183.38
State: KY District: Full Name (Last, First, Middle Initial) Team Emerson Mailing Address 400 Broadway Ste. 326 City State Zip Code Cape Girardeau MO 63701 Purpose of Disbursement Candidate Name Johnny's Half Shell on 3/26/2009 Office Sought: X House President State: MO District: 08 Full Name (Last, First, Middle Initial) State: MO District: 08 Full Name (Last, First, Middle Initial) Klein For Congress Mailing Address 21301 Powerline Road, Suite 204 City State Zip Code Category/ Type Other (specify) ▼ Transaction ID: 2961873 Date of Disbursement Category/ Type Transaction ID: 2961873 Date of Disbursement Transaction ID: 2961873 Date of Disbursement Transaction ID: 2961873 Date of Disbursement Amount of Each Disbursement Transaction ID: 2961873 Date of Disbursement Transaction ID: 2961873 Date of Disbursement Transaction ID: 2961873 Date of Disbursement Other (specify) ▼ Amount of Each Disbursement Other (specify) ▼ City State Zip Code Boca Raton FL 33431 Purpose of Disbursement Candidate Name Rep. Ronald Klein	
Full Name (Last, First, Middle Initial) Team Emerson Mailing Address 400 Broadway Ste. 326 City State Zip Code Cape Girardeau MO 63701 Purpose of Disbursement Candidate Name Jo Ann Emerson Office Sought: X House Senate President State: MO District: 08 Full Name (Last, First, Middle Initial) Klein For Congress Mailing Address 21301 Powerline Road, Suite 204 City State Zip Code MO Trype Transaction ID: 2961873 Amount of Each Disbursement 1 Transaction ID: 2961873 Date of Disbursement 1 Date of Disbursement 1 Transaction ID: 2961873 Date of Disbursement 1 Date of Disbursement 2 Date of Disbursement	C-
Site. 326 City Cape Girardeau Purpose of Disbursement Candidate Name Jo Ann Emerson Office Sought: X House Senate President President State: MO District: 08 Full Name (Last, First, Middle Initial) Klein For Congress Mailing Address 21301 Powerline Road, Suite 204 City Boca Raton Purpose of Disbursement Candidate Name Rep. Ronald Klein Amount of Each Disbursement Other (specify) Transaction ID: 2961873 Date of Disbursement Other (specify) Amount of Each Disbursement Other (specify) Transaction ID: 2961873 Date of Disbursement Other (specify) Type	34
City Cape Girardeau MO 63701 Purpose of Disbursement Candidate Name Jo Ann Emerson Office Sought: X House Senate President President State: MO District: 08 Full Name (Last, First, Middle Initial) Klein For Congress Mailing Address 21301 Powerline Road, Suite 204 City State Zip Code FL 33431 Purpose of Disbursement Candidate Name Rep. Ronald Klein Amount of Each Disbursement 1 Category/ Type Amount of Each Disbursement 1 Transaction ID: 2961873 Date of Disbursement Amount of Each Disbursement 2 Amount of Each Disbursement 1 Category/ Type	2009
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Full Name (Last, First, Middle Initial) Klein For Congress Mailing Address 21301 Powerline Road, Suite 204 City State Zip Code Boca Raton FL 33431 Purpose of Disbursement Candidate Name Rep. Ronald Klein Transaction ID: 2961873 Date of Disbursement Amount of Each Disbursement 1 Category/ Type	
Mailing Address 21301 Powerline Road, Suite 204 City State Zip Code Boca Raton FL 33431 Purpose of Disbursement Candidate Name Rep. Ronald Klein Description of Powerline Road, Suite 204 O 4 0 1 Amount of Each Disbursement O11 Category/ Type	36
Boca Raton FL 33431 Purpose of Disbursement Candidate Name Rep. Ronald Klein Tupe	2009
Candidate Name Rep. Ronald Klein O11 Category/ Type	
Rep. Ronald Klein Type	000.00
Office Sought: X House Disbursement For: 2010	
Senate X Primary General President Other (specify) ▼	
State: FL District: 22	

SCHEDULE B (FEC Form 3X)

	Use separate schedule(s)	LINE NUMBER: PAGE 22 / 25 ck only one)
TEMIZED DISBURSEMENTS	Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29
Any Information copied from such Reports and Stator for commercial purposes, other than using the na NAME OF COMMITTEE (In Full)	ements may not be sold or used by any pe	erson for the purpose of soliciting contributions
The Council of Insurance Agents & Brok	ers Political Action Committee	
Full Name (Last, First, Middle Initial) Charlie Melancon Campaign Committee	Inc	Transaction ID: 29618737 Date of Disbursement 0 4 0 1 2 0 0 9
Mailing Address PO Box 549		
City Napoleonville	State Zip Code LA 70390	Amount of Each Disbursement this Perio
Purpose of Disbursement	011	2500.00
Candidate Name Rep. Charles J. Melancon	Categor Type	y/
Senate President	xsement For: 2010 X Primary General Other (specify)	
State: LA District: 03 Full Name (Last, First, Middle Initial)		Transaction ID: 29648251
Kevin Mccarthy For Congress		Date of Disbursement
Mailing Address PO Box 12667		04 / 01 / 2009
City Bakersfield	State Zip Code CA 93389	Amount of Each Disbursement this Perio
Purpose of Disbursement	011	2000.00
Candidate Name Rep. Kevin McCarthy	Categor Type	y/
Office Sought: X House Senate President State: CA District: 22	sement For: 2010 X Primary General Other (specify) ▼	
Full Name (Last, First, Middle Initial) Larson for Congress		Transaction ID: 29900313 Date of Disbursement
Mailing Address 6282 Occoquan Fores	Drive	04
City Manassas	State Zip Code VA 20112	Amount of Each Disbursement this Perio
Purpose of Disbursement	011	1000.00
Candidate Name John Larson	Categor Type	y/
Senate President	xement For: 2010 X Primary General Other (specify)	
State: CT District: 01		
		5500.00

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3(CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
T	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 X 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam			
\rangle	NAME OF COMMITTEE (In Full) The Council of Insurance Agents & Broker	rs Political Action Commit	ttee	
	Full Name (Last, First, Middle Initial) Jim Risch For U S Senate Committee			Transaction ID: 29900325 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address 5400 S Cole Road			04 24 2009
	City Boise	State Zip Code ID 83709		Amount of Each Disbursement this Period
	Purpose of Disbursement DEBT RETIREMENT		011	1000.00
	Candidate Name Mr. James Risch		Category/ Type	
	X Senate President	ement For: 2008 Primary X General Other (specify) ▼ al Debt 2008		DEBT RETIREMENT
	Full Name (Last, First, Middle Initial)			Transaction ID: 29900335
	Ben Nelson for US Senate			Date of Disbursement
	Mailing Address 426 C Street, NE			$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 4 \\ 2 & 4 & 4 \end{bmatrix} / \begin{bmatrix} 0 & 4 & 4 & 4 \\ 2 & 2 & 0 & 0 & 9 \end{bmatrix}$
	City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
	Purpose of Disbursement		011	1000.00
	Candidate Name Ben Nelson		Category/ Type	
		ement For: 2012 (Primary General Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	2000.00
TOTAL This Period (last page this line number only)	•	9683.38

State: NE

District:

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SCHEDULE B (FEC Form 3X)		arate schedule(s)	IIE(S) (check only o		OR LINE NUMBER: PAG						24 / 2	25	
ITEMIZED DISBURSEMENTS		category of the Summary Page		P	_		22 28a	П	23 28b	24 28c		25 29	26 30l
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													<u> </u>
NAME OF COMMITTEE (In Full)													
The Council of Insurance Agents & Brokers	s Political	Action Commi	ttee										
Full Name (Last, First, Middle Initial) Authorize.Net									on ID:	29792 ement	509)	
Mailing Address 808 East Utah Valley Dri	ve						0 ^M 4	М	[/] 0	1 /	Ž	0 0 5) Y
City American Fork	State UT	Zip Code 84003					Amou	nt o	f Each	Disburse	men	t this f	Period
Purpose of Disbursement		1		_								59.00	
Candidate Name				_	01 egory/				-			•	
					/pe								
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼											
Full Name (Last, First, Middle Initial) First Data							Date	of D	isburse		077		
Mailing Address P.O. Box 6600							0 ^M 4	М	[′]	3 /	Ž	0 0 9) Y
•	State MD	Zip Code 21741-6600					Amou	nt o	f Each	Disburse	men	t this f	Period
Purpose of Disbursement				0	01						3	48.07	7
Candidate Name			Са	ate	egory/ vpe								
Senate President	ment For: Primary Other (spe	General			<u> </u>								
State: District:													
Full Name (Last, First, Middle Initial) American Express									on ID:	29884 ement	137	•	
Mailing Address P.O. Box 2878							0 ^M 4	М	[/] 3	0 /		o ŏ s) Y
City	State	Zip Code					Amou	nt o	f Each	Disburse	men	t this f	Period
Omaha	NE	68103-2878					-	-					
Purpose of Disbursement				Ō	01			-			. 4	64.01	
Candidate Name					egory/ /pe								
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ccify) ▼											
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SUBTOTAL of Disbursements This Page (optional)											8	71.08	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 25 / 25
ITEMIZED DISBURSEMENTS	for each category of the	(check only	y one)
II LIMIZED DISDONSEMENTS	Detailed Summary Page	X 21b	22 23 24 25 26
	, ,	27	28a 28b 28c 29 30b
Any Information copied from such Reports and State	ments may not be sold or used by	any person f	or the purpose of soliciting contributions
or for commercial purposes, other than using the nar	ne and address of any political co	mmittee to so	licit contributions from such committee
NAME OF COMMITTEE (In Full)			
The Council of Insurance Agents & Broke	rs Political Action Committe	е	
Full Name (Last, First, Middle Initial)			Transaction ID: 29884256
Wired For Change			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 1700 Connecticut Aven Suite 403	ue, NW		$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & Y \\ Z & O & O & 9 \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
Washington	DC 20009		
Purpose of Disbursement			400.00
		001	
Candidate Name		Category/	
		Туре	
Office Sought: House Disburs	ement For:		
Senate	Primary General		
President	Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	400.00
TOTAL This Period (last page this line number only)	<u> </u>	1271.08